

**Conclusion** Group intervention in CG has proven effective in this population, specially regarding depression and post-traumatic stress levels.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1458>

#### EV1129

### Trait mindfulness at baseline predicts increases in telomerase activity over time



F.S. Bersani<sup>1,\*</sup>, A. Gilbert<sup>2</sup>, M. Coccia<sup>2</sup>, C. Saron<sup>3</sup>, E. Epel<sup>2</sup>

<sup>1</sup> Sapienza University of Rome, Department of Neurology and Psychiatry, Roma, Italy

<sup>2</sup> University of California San Francisco, Department of Psychiatry, San Francisco, USA

<sup>3</sup> University of California Davis, Center for Mind and Brain, Davis, USA

\* Corresponding author.

**Introduction** Preliminary investigations of cross-sectional samples have linked trait mindfulness with measures related to the hypothalamic–pituitary–adrenal (HPA)-mediated stress response and to the inflammatory system, suggesting that this is one potential pathway linking mindfulness based interventions and health. However, no previous studies explored the association between the trait mindfulness construct and markers of cellular ageing.

**Methods** In the current study we examined in a sample of healthy mothers ( $n=92$ ) of a child with Autism Spectrum Disorder (i.e. women showing high levels of chronic psychological stress) the prospective associations between a multidimensional scale of trait mindfulness, the Five Facet Mindfulness Questionnaire (FFMQ), and telomerase activity (TA), a marker of cellular ageing and telomere homeostasis. Participants' trait mindfulness and TA were assessed at baseline as well as 9 and 18 month follow-up.

**Results** Analysis showed that higher levels of baseline mindfulness on FFMQ observation and describe subscales were related to increase in TA from baseline to 9 month ( $r=0.27$ ,  $P=0.03$  and  $r=0.24$ ,  $P=.04$ , respectively). Additionally, the FFMQ Describe subscale was related to increase in TA from baseline to 18 month ( $r=.30$ ,  $P=.02$ ). Results are reported following covariate adjustment of age, BMI, ethnicity, and education.

**Discussion** Our results showed that higher levels of baseline mindfulness are associated with higher increases in TA after 9 months and 18 months, with increased TA reportedly being associated with decreased oxidative damage, increased telomere length and overall more functional cellular physiology. These findings support a role of mindfulness-related interventions to increase general and mental health.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1459>

#### EV1130

### The role of psychotherapy in improving the quality of life and social rehabilitation of patients with Psoriasis



V. Bialuhina<sup>1,\*</sup>, I. Belugina<sup>2</sup>, L. Azarova<sup>3</sup>, N. Siatkovskaia<sup>4</sup>, V. Siatkovski<sup>3</sup>, N. Jagovdik<sup>2</sup>

<sup>1</sup> Belarusian state medical university, Psychiatry and medical psychology, Minsk, Belarus

<sup>2</sup> Belarusian state medical university, Dermatology, Minsk, Belarus

<sup>3</sup> Belarusian state university, Social work and rehabilitology, Minsk, Belarus

<sup>4</sup> Evergreen college, Psychology, Toronto, Canada

\* Corresponding author.

**Introduction** Psychotherapy can ease physical symptoms of patients with skin pathology.

**Objectives** To study features of social and psychological maladaptation and quality of life in patients with psoriasis.

**Aim** To study psychotherapy role in quality of life improvement and social rehabilitation of patients with psoriasis and their family members for the period 2000–2015 in the Belarusian population.

**Methods** One hundred and twenty four patients with cutaneous psoriasis, 12 patients with psoriatic arthritis and 42 healthy persons were studied. Quality of life, types of attitude towards the disease, level of social frustration, depression, level of social maladaptation, psychological defense mechanisms and patients attitudes towards psychotherapy were assessed.

**Results** There were detected among patients with psoriasis (especially with arthropathy form): social maladaptation, higher level of social frustration and depression ( $P<0.05$ ), decrease in quality of life ( $P<0.001$ ), the wider range of psychological defense mechanisms (negation, regression, substitution, reactive formation,  $P<0.05$ ). Maladaptive types of attitude towards the disease were presented in 24% patients with psoriasis and almost in 41% patients with arthropathy.

**Conclusions** Psychotherapy can have a high potential for social rehabilitation and quality of life improvement for patients with psoriasis. Obtained data in social maladaptation indicate family therapy as an important therapeutic part for patients with psoriasis. Moreover, knowledge about patients psychological defense mechanisms can help to choose a direction and methods of individual psychotherapy of social maladaptation. This research shows also that psychotherapeutic approach and family psychotherapy remains underestimated in Belarus.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1460>

#### EV1131

### The evolution of cognitive behavioural therapy – The third generation and its effectiveness



S. Carvalho<sup>1,\*</sup>, C.P. Martins<sup>1</sup>, H.S. Almeida<sup>1</sup>, F. Silva<sup>2</sup>

<sup>1</sup> Hospital de Magalhães Lemos, Service B, Porto, Portugal

<sup>2</sup> Hospital de Magalhães Lemos, Service C, Porto, Portugal

\* Corresponding author.

**Introduction** First wave cognitive behavioural therapy (CBT) focuses essentially on classical conditioning and operant learning and second wave on information processing. They are based on the premise that certain cognitions, emotions and physiological states lead to dysfunctional behaviour and so, by eliminating the first ones, changes in behaviour will take place. Third wave CBT appeared in an attempt to increase the effectiveness of first and second wave by emphasizing contextual and experiential change strategies.

**Objectives/Aims** To make a review on the actual state of the art of third wave CBT, focusing on MBSR (Mindfulness-Based Stress Reduction), MCBT (Mindfulness-based Cognitive Behavioural Therapy), DBT (Dialectical Behaviour Therapy), ACT (Acceptance and Commitment Therapy) and CFT (Compassion Focused Therapy).

**Methods** Research on PubMed using the terms “third wave cognitive behavioural therapy”.

**Results** Methods and targets differ between MBSR, MCBT, DBT, ACT and CFT. Depression, anxiety and borderline personality disorders are some of those targets. However, a transdiagnostic approach is the hallmark of all third wave therapies: mental processes or emotions transversal to many psychiatric disorders such as shame, self-criticism, experiential avoidance or cognitive fusion are the main focus, emphasizing the context and human experience over any categorical diagnosis.